



Cardiac Emergency Response Plan and Notice

School _____

School Year _____

I, _____, parent/guardian of
_____, have received and reviewed a copy
of the Cardiac Emergency Response Plan for Tug Valley High School,
Mingo County school buildings and Mingo County School District
athletic events. I am also aware that this plan may be found on the
school website.

Parent/Guardian Signature _____

Student Signature _____